



# FEE WAIVER REQUEST

SAN LUIS OBISPO COUNTY DEPARTMENT OF PLANNING AND BUILDING

976 OSOS STREET • ROOM 200 • SAN LUIS OBISPO • CALIFORNIA 93408 • (805) 781-5600

*Promoting the Wise Use of Land • Helping to Build Great Communities*

**Property Owner:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Case Number(s):** \_\_\_\_\_

**Assessor Parcel Number(s):** \_\_\_\_\_

**Justification:** (check all that apply)

- ☐ The proposed project will be available for use by the public at-large and is likely that the project will be used or will benefit more than the residents of the immediate vicinity.

The project will be of obvious public benefit as evidenced by:

- ☐ The project meets a need previously identified or recognized by the Board of Supervisors

- ☐ The project replaces another facility that previously provided public benefit

- ☐ The project provides a facility not presently available in the community

- ☐ The project has generated substantial, obvious community support

- ☐ The project would reduce other County costs or increase other County revenues

- ☐ The fees to be waived will not exceed a total of \$5,000

Other Category of waiver:

- ☐ Earthquake Waiver

- ☐ Veteran's exemption

- ☐ Other (Specify) \_\_\_\_\_

Attach additional information as needed to explain how project meets the above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Staff use only:

Fees waived by Director? ☐ Yes ☐ No Date: \_\_\_\_\_

By: \_\_\_\_\_ Letter sent: \_\_\_\_\_

Basis for Decision: \_\_\_\_\_

Amount Waived (if applicable): \_\_\_\_\_

BOS Hearing Date (if applicable): \_\_\_\_\_